As a below named inventor, I hereby declare that:

My residence, post office address and ci	tizenship are as stated below n	ext to my name.			
I believe I am the original, first and sole the subject matter which is claimed and	inventor (if only one name is l for which a patent is sought on	isted below) or an original, first and the invention entitled:	joint inventor (if plural names are listed below)	of	
CHIMERIO	C POLYPEPTIDES OF SE	RUM ALBUMIN AND USES R	ELATED THERETO		
the specification of which (check one)					
is attached here     was filed on     amended on		Application Number or PCT Interna	tional Application Number, and w	'as	
I hereby state that I have reviewed and u referred to above.	inderstand the contents of the a	above identified specification, include	ling the claims, as amended by any amendment		
I acknowledge the duty to disclose infor	mation, which is material to pa	atentability as defined in Title 37, Co	ode of Federal Regulation, § 1.56.		
I hereby claim foreign priority benefits a below and have also identified below an priority is claimed.	inder Title 35, United States C y foreign application for paten	ode, § 119(a)-(d) of any foreign app t or inventor's certificate having a fi	lication(s) for patent or inventor's certificate liste ling date before that of the application on which	:d	
Prior Foreign Application(s)			Priority Claimed		
			Yes No		
(Number)	(Country)	(Day/Month/Year Filed)			
(Number)	(Country)	(Day/Month/Year Filed)	Yes No		
I hereby claim the benefit under Title 35	, , ,	•	polication(s) listed below.		
60/144,534	July 19, 1999		<b>,</b>		
(Application Number)	(Filing Date)	-			
(Application Number)	(Filing Date)	-			
of the claims of this application is not di	sclosed in the prior United Sta disclose information which is a	tes application in the manner provion material to patentability as defined in and the national or PCT internation	ted below and, insofar as the subject matter of earlied by the first paragraph of Title 35, United State in Title 37, Code of Federal Regulations, § 1.56 and filing date of this application.  Pending (Status: patented, pending, abandoned)	<b>≥</b> S	
(Application Number)	(Filing Dat	e)	(Status: patented, pending, abandoned)	-	
I hereby appoint Beth E. Arnold, Reg. No. 35,430; Isabelle Clauss, Reg No. P-47,326; Kirk A. Damman, Reg. No. 42,461; Stephen B. Deutsch, Reg. No. 46,663; Jason Gish, Reg. No. 42,581; Dana Gordon, Reg. No. 44,719; Robert A. Greenberg, Reg. No. 44,133; David P. Halstead, Reg. No. 44,735; Jennifer K. Holmes, Reg No 46,778; Edward J. Kelly, Reg. No. 38,936; David A. Lane, Reg. No. 39,261; W. Hugo Liepmann, Reg. No. 20,407; Robert A. Mazzarese, Reg. No. 42,852; Jim Olesen, Reg. No.46,967; Kevin A. Oliver, Reg. No. 42,049; Chinh H. Pham, Reg. No. 39,329; Philip C. Swain, Reg. No. 32,376; Wolfgang E. Stutius, Reg. No. 40,256; Kingsley L. Taft, Reg. No. 43,946; John Quisel, Reg No. P-47,874; Anita Varma, Reg. No. 43,221; Matthew P. Vincent, Reg. No. 36,709; Sharon Webb, Reg. No. 47,172; and John L. Welch, Reg. No. 28,129 as attorneys/agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.  Address all telephone calls to David P. Halstead at telephone number (617) 832-1754.					
	•	017) 032-1734.			
Address all correspondence to:	Patent Group Foley, Hoag & Eliot LLP One Post Office Square Boston, Ma. 02109-2170				
and further that these statements were m	ade with the knowledge that w	rillful false statements and the like s	de on information and belief are believed to be true or made are punishable by fine or imprisonment, depardize the validity of the application or any	1е; ог	
Full name of sole or first inventor (given	n name, family name):Jen	o Gyuris		_	
Inventor's signature: Residence: 171 Swanton Street, Winc Post Office Address: Same as above	thester, Massachusetts 01890		Date:	- - -	

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Full name of second joint inventor (given name): Lou Lamphere		
Inventor's signature:	Date:	
Residence: 112 Russel Road, Newton, Massachusetts 02465	Citizenship: <u>U.S.A.</u>	
Post Office Address: Same as above		
Full name of third joint inventor (given name, family name):		
Inventor's signature:		
Residence:	Citizenship:	
Post Office Address:	<del></del>	
Full name of fourth joint inventor (given name, family name):		
Inventor's signature:	Date:	
Residence:		
Post Office Address:		
Full name of fifth joint inventor (given name, family name):		
Inventor's signature:	Date:	
Residence:		
Post Office Address:		